

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee LOUISIANA MEDICAL POLITICAL ACTION COMMI 6767 Perkins Road Suite 100 Baton Rouge, LA 70808-4263 Check If: New Committee <input type="checkbox"/>	2. Date of this Statement <div style="text-align: center;">1/20/2015</div>	Report Number: 46494 Date Filed: 1/20/2015									
	3. Estimated Membership <div style="text-align: center;">300</div>										
	4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>										
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Position</u></th> <th style="text-align: left; width: 34%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>KEITH F. DESONIER MD</td> <td>Chairperson</td> <td>555 Doctor Michael DeBakey Dr. Lake Charles, LA</td> </tr> <tr> <td>JOHN W. NOBLE JR. MD</td> <td>Treasurer</td> <td>1747 Imperial Blvd. Lake Charles, LA</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	KEITH F. DESONIER MD	Chairperson	555 Doctor Michael DeBakey Dr. Lake Charles, LA	JOHN W. NOBLE JR. MD	Treasurer	1747 Imperial Blvd. Lake Charles, LA
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JOHN W. NOBLE JR. MD	Treasurer	1747 Imperial Blvd. Lake Charles, LA									
6. Affiliated Organizations <small>(Any organization other than a political committee which directly or indirectly established, administers, or financially supports this committee.)</small> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> <th style="text-align: left; width: 34%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr> <td colspan="3">On attached sheet</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>	On attached sheet					
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7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td colspan="2">On attached sheet</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	On attached sheet						
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee											
b. Name of Candidate	c. Office Sought by the Candidate										
9. a. Name of Person Preparing Report BURLAND AND ASSOCIATES INC. b. Daytime Telephone 225-767-7163											
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief. This <u>20th</u> day of <u>January</u> , <u>2015</u> . <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <u>Keith F. DeSonnier MD</u> Signature of Committee/Chairperson </td> <td style="width: 50%; vertical-align: top;"> <u>337-439-0555</u> Daytime Telephone </td> </tr> <tr> <td style="vertical-align: top;"> <u>John W. Noble Jr. MD</u> Signature of Committee Treasurer, if any </td> <td style="vertical-align: top;"> <u>337-721-7236</u> Daytime Telephone </td> </tr> </table>			<u>Keith F. DeSonnier MD</u> Signature of Committee/Chairperson	<u>337-439-0555</u> Daytime Telephone	<u>John W. Noble Jr. MD</u> Signature of Committee Treasurer, if any	<u>337-721-7236</u> Daytime Telephone					
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<u>John W. Noble Jr. MD</u> Signature of Committee Treasurer, if any	<u>337-721-7236</u> Daytime Telephone										

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name

b. Address

c. Relationship to Committee

LOUISIANA STATE MEDICAL
SOCIETY

6767 Perkins Rd
Suite 100
Baton Rouge, LA 70808-4263

Affiliated Organization

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

b. Address

CAPITAL ONE BANK

440 Third Street
5th Floor
Baton Rouge, LA 70802

CHARLES SCHWAB

C/O Eagle Management
3850 North Causeway Blvd. #1090
Metairie, LA 70002

COMMITTEES WITH OVER 250 MEMBERS

The following certification is OPTIONAL and should be completed ONLY if it is applicable to your committee . Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political committees.

11. WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members **as of December 31 of the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION.** We further certify that at least two hundred fifty (250) of the members of this political committee contributed at least fifty dollars (\$50.00) to this committee **during the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION.**

This 20th day of January, 2015.

Keith F. DeSonnier MD

Signature of Committee/Chairperson

337-439-0555

Daytime Telephone

John W. Noble Jr. MD

Signature of Committee Treasurer, if any

337-721-7236

Daytime Telephone